

Client Lodging Complaint

Name

Address:

Zip:

DOB

Telephone:

Client's Complaint

Please provide a detailed description of your complaint.

Please tell us what resolution you are seeking for this complaint.

Signature

Date

-----Office Use Only-----

Date Received: _____ by _____

Date Given to Privacy Officer: _____ by _____

Action Taken:

Follow-up Needed:

Copy Given to client on _____ (unless in violation of another client's rights)

Date added to Grievance _____ Signature _____